

DO NOT PUBLISH  
THIS SECTION

ARTICLE I  
The company  
name must  
contain an  
ending which  
may be "limited  
liability  
company,"  
"limited  
company," or  
the  
abbreviations  
"L.L.C.",  
"L.C.", "LLC"  
or "LC". If you  
are the holder  
or assignee of  
a tradename or  
trademark,  
attach  
Declaration of  
Tradenam  
Holder form.

ARTICLE 2  
May be in care of the  
statutory agent.

ARTICLE 3  
The statutory agent  
address cannot be a  
P.O. Box. It must be  
a physical address in  
Arizona. The agent  
must sign the Articles  
or provide a consent  
to acceptance of  
appointment.

ARTICLES 4  
Complete this section  
only if you desire to  
select a date or  
occurrence when the  
company will  
dissolve. If perpetual  
duration is desired,  
leave this section  
blank.

ARTICLE 5.a.  
Check which  
management structure  
will be applicable to  
your company.

## ARTICLES OF ORGANIZATION OF

(An Arizona Limited Liability Company)

1. Name. The name of the limited liability company is:  
\_\_\_\_\_
2. Registered Office. The address of the registered office in Arizona is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ located in the County of \_\_\_\_\_
3. Statutory Agent. (In Arizona) The name and address of the statutory agent of the company is:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Dissolution. The latest date, if any, on which the limited liability company must dissolve is \_\_\_\_\_
- 5.a. Management.  
[ ] Management of the limited liability company is vested in a manager or managers. The names and addresses of each person who is a manager AND each member who owns a twenty percent or greater interest in the capital or profits of the limited liability company are:  
  
[ ] Management of the limited liability company is reserved to the members. The names and addresses of each person who is a member are:

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5.b.

Name:

☐ member

☐ manager

☐ member

☐ manager

Address:

City, State, Zip:

Name:

☐ member

☐ manager

☐ member

☐ manager

Address:

City, State, Zip:

**ARTICLE 5.b.**

Depending upon your selection in 5.a., provide the names and address of the managers and members of the organization. Check the applicable title for each person. A member managed company cannot contain a manager or managers.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Print Name Here]

\_\_\_\_\_  
[Print Name Here]

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

The person(s) executing this document need not be member(s) of the company.

Your fax and phone number is optional.

The agent may consent to the appointment by either executing the consent, attaching a cover letter, or if paying by check, executing the check.

**Acceptance of Appointment By Statutory Agent**

I \_\_\_\_\_, having been designated to act as Statutory Agent, hereby consent to act in that capacity until removed or resignation is submitted in accordance with the Arizona Revised Statutes.

\_\_\_\_\_  
Signature of Statutory Agent